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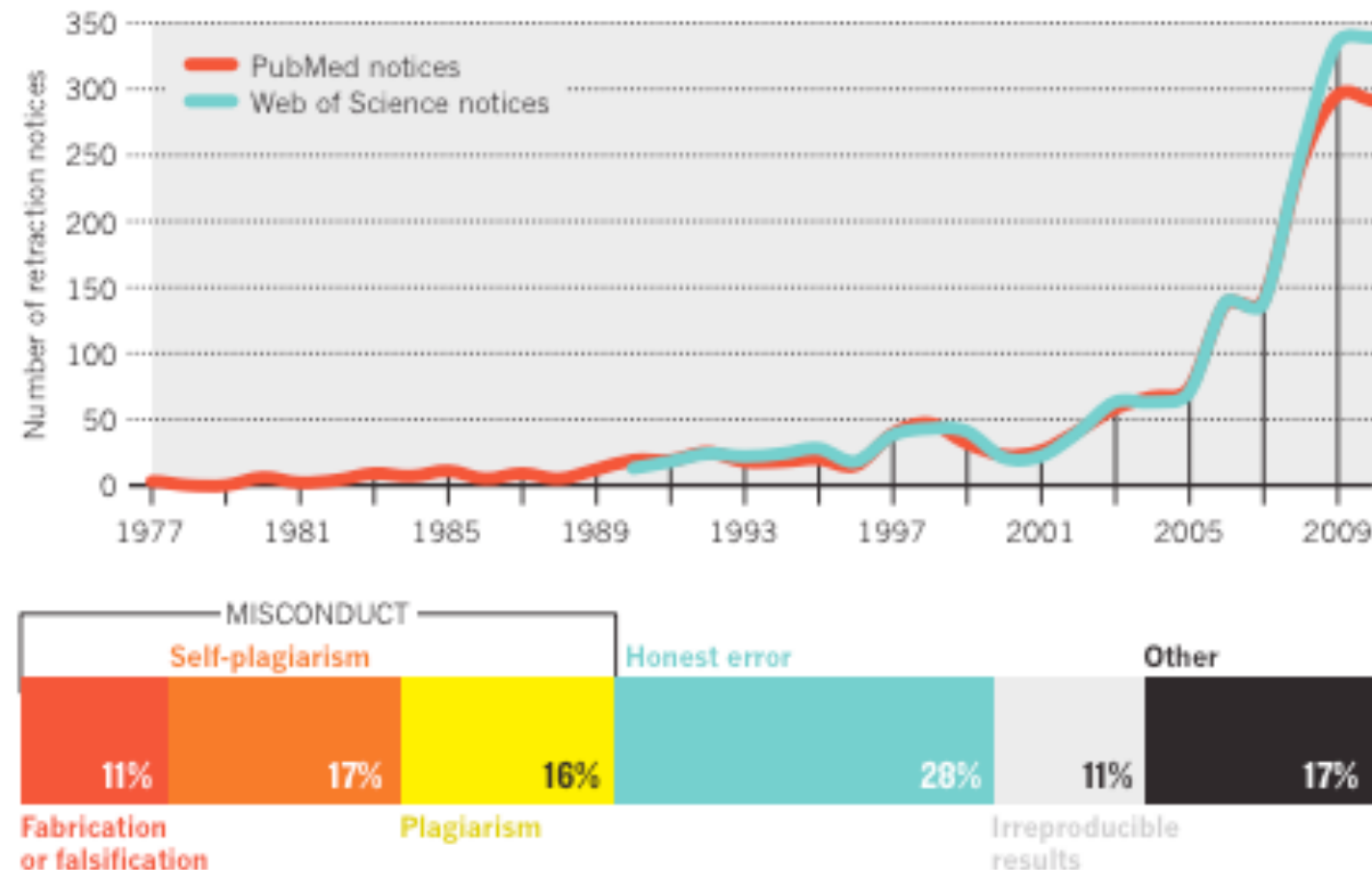
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Nature **478**, 26–28 (2011) Science publishing: The trouble with retractions

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REVIEW

Strategic Reading, Ontologies, and the Future of Scientific Publishing

Allen H. Renear* and Carole L. Palmer

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Comparative genomic profiling of Dutch clinical *Bordetella pertussis* isolates using DNA microarrays: Identification of genes absent from epidemic strains

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- 1 Laboratory for Infectious Diseases and Screening (LIS) Centre for Infectious Disease Control, National Institute for Public Health and the Environment (RIVM), Bilthoven, The Netherlands
- 2 Laboratory for Health Protection Research, National Institute for Public Health and the Environment (RIVM), Bilthoven, The Netherlands
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Joanna Kempner*

1 Rutgers University, Department of Sociology and Institute for Health, Health Care Policy and Aging Research, New Brunswick, New Jersey, United States of America

Abstract [Top](#)

Background

Can political controversy have a "chilling effect" on the production of new science? This is a timely concern, given how often American politicians are accused of undermining science for political purposes. Yet little is known about how scientists react to these kinds of controversies.

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controversies.

Methods and Findings

Drawing on interview ($n = 30$) and survey data ($n = 82$), this study examines the reactions of scientists whose National Institutes of Health (NIH)-funded grants were implicated in a highly publicized political controversy. Critics charged that these grants were "a waste of taxpayer money." The NIH defended each grant and no funding was rescinded. Nevertheless, this study finds that many of the scientists whose grants were criticized now engage in self-censorship. About half of the sample said that they now remove potentially controversial words from their grant and a quarter reported eliminating entire topics from their research agendas. Four researchers reportedly chose to move into more secure positions entirely, either outside academia or in jobs that guaranteed salaries. About 10% of the group reported that this controversy strengthened their commitment to complete their research and disseminate it widely.

Conclusions

These findings provide evidence that political controversies can shape what scientists choose to study. Debates about the politics of science usually focus on the direct suppression, distortion, and manipulation of scientific results. This study suggests that scholars must also examine how scientists may self-censor in response to political events.

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published online 24 November 2010.

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

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

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MethodsTwo hundred twenty-five patients from 2003 to 2010 were analyzed, who have undergone partial nephrectomy or radical nephrectomy for renal tumor, of size ≤ 4 cm, with normal contralateral kidney. The glomerular filtration rate was computed with the four-variable modification of diet in renal dysfunction (MDRD) criterion. Renal dysfunction was defined as GFR of < 60 mL/min per 1.73 m². We applied Cox proportional hazards model to analyze demographic and clinicopathologic parameters to determine the variables independently associated with the development of renal dysfunction.
ResultsOne hundred twenty-nine out of 225 patients were included in the partial nephrectomy group, while 96 patients were in the radical nephrectomy groups; 97 out of 225 patients developed renal dysfunction: 86 out of 97 in the radical nephrectomy group and 11 out of 97 in the partial nephrectomy group. The 2-y probability of absence of renal dysfunction with partial nephrectomy or radical nephrectomy was 95.7% and 58.3%, respectively ($P < 0.001$). Among 20 patients with diabetes, 12 (60.0%) developed renal dysfunction: 10 patients underwent an RN and two underwent a PN. The 2-y probability of absence of renal dysfunction with and without diabetes was 46.5% and 76.4%, respectively ($P = 0.006$). Multivariate analysis showed that age ($P = 0.001$), type of operation ($P < 0.001$), preoperative GFR ($P = 0.001$), and diabetes ($P = 0.042$) were associated with the development of renal dysfunction.
ConclusionsThe results of this study show that nephron-sparing surgery (NSS) for renal cell carcinomas should be attempted to prevent renal dysfunction in all eligible patients.



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Detlev H. Kelm^{1,*}, Ralph Simon², Doreen Kuhlow³, Christian C. Voigt¹ and Michael Ristow^{3,4}

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*Author for correspondence (dkelm1@gmx.de).

Abstract

High blood glucose levels caused by excessive sugar consumption are detrimental to mammalian health and life expectancy. Despite consuming vast quantities of sugar-rich floral nectar, nectar-feeding bats are long-lived, provoking the question of how they regulate blood glucose. We investigated blood glucose levels in nectar-feeding bats (*Glossophaga soricina*) in experiments in which we varied the amount of dietary sugar or flight time. Blood glucose levels increased with the quantity of glucose ingested and exceeded 25 mmol l⁻¹ blood in resting bats, which is among the highest values ever recorded in



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High activity on a high-sugar diet: blood glucose regulation in nectar-feeding honeycreepers

Detlev H. Kelm^{1,*}, Ralph Ristow² and Michael Ristow^{3,4}

+ Author Affiliations

* Author for correspondence

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Allen H. Renear* and Carole L. Palmer

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Joanna Kempner*

Rutgers University, Department of Sociology and Institute for Health, Health Care Policy and Aging Research, New Brunswick, New Jersey, United States of America



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Abbreviations: DHHS, US Department of Health and Human Services

ABSTRACT

Background

Can political controversy have a “chilling effect” on the production of new science? This is a timely concern, given how often American politicians are accused of undermining science for political purposes. Yet little is known about how scientists react to these kinds of controversies.

Methods and Findings

Drawing on interview ($n = 30$) and survey data ($n = 82$), this study examines the reactions of scientists whose National Institutes of Health (NIH)-funded grants were implicated in a highly publicized political controversy. Critics charged that these grants were “a waste of taxpayer money.” The NIH defended each grant and no funding was rescinded. Nevertheless, this study finds that many of the scientists whose grants were criticized now engage in self-censorship. About half of the sample said that they now remove potentially controversial words from their grant and a quarter reported eliminating entire topics from their research agendas. Four researchers reportedly chose to move into more secure positions entirely, either outside academia or in jobs that guaranteed salaries. About 10% of the group reported that this controversy strengthened their commitment to complete their research and disseminate it widely.

Conclusions

These findings provide evidence that political controversies can shape what scientists choose to study. Debates about the politics of science usually focus on the direct suppression, distortion, and manipulation of scientific results. This study suggests that scholars must also

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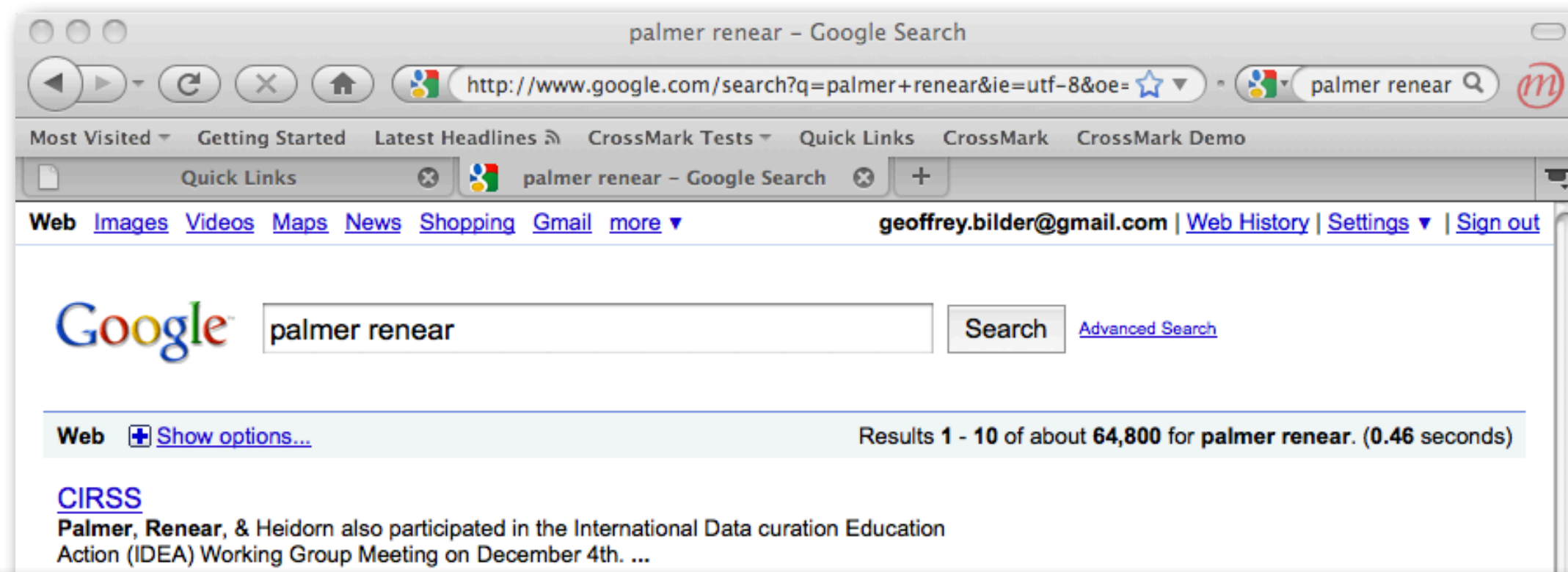
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Optimization of the indications for allogeneic stem cell transplantation in Acute Myeloid Leukemia based on interactive diagnostic strategies

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Summary



The indications for allogeneic stem cell transplantation (SCT) in Acute Myeloid Leukemia (AML) represent a real challenge due to the clinical and genetic heterogeneity of the disorder. Therefore, an optimized indication for SCT in AML first requires the determination of the individual relapse risk based on diverse chromosomal and molecular prognosis-defining aberrations. A broad panel of diagnostic methods is needed to allow such subclassification and prognostic stratification: cytomorphology, cytogenetics, molecular genetics, and immunophenotyping by multiparameter flow cytometry. These methods should not be seen as isolated techniques but as parts of an integral network with hierarchies and interactions. Examples for a poor risk constellation as a clear indication for allogeneic SCT are provided by anomalies of chromosome 7, complex aberrations, or FLT3-length mutations. In contrast, the favorable reciprocal translocations such as the t(15;17)/PML-RARA or t(8;21)/AML1-ETO are not indications for SCT in first remission due to the rather good prognosis after standard therapy. Further, the indication for SCT should include the results of minimal residual disease (MRD) diagnostics by polymerase chain reaction (PCR) or flow cytometry. New aspects

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Optimization of the indications for allogeneic stem cell transplantation in Acute Myeloid Leukemia based on interactive diagnostic strategies

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